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MAR 30 2005

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IMPORTANT NOTICE
TELECOPY/FACSIMILE COVER LETTER

TO: U.S. Patent and Trademark Office
Examiner: Henry N. Tran
Art Unit: 2674

DATE: March 30, 2005

FROM: Lawrence J. McClure

TIME:

TOTAL NO. OF PAGES, INCLUDING COVER: 19

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MESSAGE:

RE: U.S. Patent Application Serial No.: 09/468,581, Our Ref. 81870.0007

I hereby certify that the following documents:

- Amendment Under 37 C.F.R. § 1.116/Amendment Transmittal Letter
- Petition for Extension of Time (one month)

are being facsimile transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above application.

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Date of Deposit


Diane Zynn

TELECOPY/FAX NUMBER: 703-872-9306 - Art Unit 2674

CLIENT NUMBER: 81870.0007

ATTORNEY BILLING NUMBER: 1966

CONFIRMATION NUMBER: (please return fax to Diane Zynn)

FORM PTO-1083

81870.0007
Patent Application No. 09/468,581

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re application of:

Takashi MINAMI, et al.

Serial No: 09/468,581

Filed: December 20, 1999

For: A MULTI-MONITOR, AUXILIARY MONITOR, AND
MONITOR SUPPORTER

Art Unit: 2674
Examiner: Henry N. Tran

MAR 30 2005

I hereby certify that this correspondence
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(703) 872-9306:
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P.O. Box 1450
Alexandria, VA 22313-1450 on

March 30, 2005

Date of Deposit:

Diane Zynn

Name

Signature

03/30/05
Date

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P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	16	-	20	0	LG=\$18 SM=\$9	\$0
INDEPENDENT CLAIMS FEE	3	-	3	0	LG=\$84 SM=\$42	\$0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140	\$0
Independent Claims: 3, 13, 17					TOTAL	\$0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge the fee of \$ for the additional claim fees to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

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☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

By:

Barry M. Shuman

Registration No. 50,220

Date: March 30, 2005

Biltmore Tower
500 South Grand Avenue, Suite 1900
Los Angeles, California 90071
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Diane Zynn

Name

Signature *Diane Zynn* 03/30/05
Date

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Independent Claims: 3, 13, 17					TOTAL	\$ 0

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By: *Barry M. Shuman*
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